

APPLICATION FOR SPECIAL DESIGNATED LICENSE NON PROFIT APPLICANTS

NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046
Lincoln NE 68509-5046

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

Applications must be received in the Commission Office 10 working days (excluding weekends and holidays) prior to the date of the event

Complete and return **THE ORIGINAL WITH A DUPLICATE** to the Nebraska Liquor Control Commission

A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day

APPROVAL FROM CITY, VILLAGE OR COUNTY CLERK must be included with this application

A Signed Statement from Local Police Chief or County Sheriff

Letter from IRS declaring your organization exempt from payment of federal income taxes, or copy of federal tax return, as filed with the IRS, as well as affidavit signed by an officer of the organization declaring that the copy of the tax return is a true and correct copy as filed with the IRS

1. Type of Beverage(s) to be served or consumed: Beer Wine Distilled Spirits

2. Status of applicant (check one):

 Municipal Political Fine Arts Fraternal Religious Charitable Public Service

3. **Name and Address** of applicant (as listed on liquor license) (street, city, county, zip code)

4. **Address or location** of premises to be covered by license, (city, county, zip code)

5. Address of where alcohol is to be stored if other than at location listed in question #4 above

6. Name, address, phone/cell phone number of owner or lessee of premises for which the license is requested

7. **DATE(S) OF EVENT** (If Sunday, attach Sunday sales ordinance) no more then six (6) consecutive days per application

a) If alternate date is requested please list below (must be approved at local level prior to event)

ALTERNATE DATE:

b) If alternate location is requested please list below (must be approved at local level prior to event)

ALTERNATE LOCATION:

8. Time(s) of event (example 8:00 am to 1:00 am, this is considered one day)

FROM: TO:

9. Describe type of activity to be carried on during the time period for which the license is requested

10. Provide an estimated number of attendees at this event_____. If the number of attendees is over 150 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages

11. Attach a signed statement from your local police chief or county sheriff, whichever is applicable, that local law enforcement has been _____ informed in advance of this event, and if they are aware of any reason the event should not occur

12. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: _____ x _____ Draw in the space provided below area where
liquors will be sold and consumed LENGTH WIDTH (feet)

If outdoor area, how will premises be separated from areas open to the general public?

Fence, Type of fence _____

Tent

Other (explain) _____

13. Is the premises to be covered by the license located within the city/village limits?..... YES NO

14. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children?..... YES NO

15. Is the premises to be covered by the license within 300 feet of any university or college campus..... YES NO

16. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number

Check here if for consumption only (no purchases or sales, i.e. byob)

17. Will the premises to be covered by the license comply with all Nebraska sanitation laws?..... YES NO

18. Are there separate toilets for both men and women?..... YES NO

19. Other information or requests for exemptions, must be requested and approved prior to event:

20. Will there be any games of chance operating during the event? YES NO If so, describe activity

NOTICE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. **All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.**

21. Name and **telephone number/cell phone number** of immediate **supervisor**, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to.

22. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign

here

Authorized Representative/Applicant

Title

Date

Print Name

sign

here

Supervisor

Title

Date

Print Name

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

In Compliance with ADA, this form is available in other formats for persons with disabilities.

A ten day advance period is requested in writing to produce the alternate format.